Montana State Legislature

2013 Session

Additional Documents include:

- *Business Report
- *Roll Call-attendance
- *Standing Committee Reports,
- *Table Bills, Fiscal reports etc.
- *Roll Call Votes
- *Witness Statements
- *Informational items
- *Visitor Registrations
- *Any other Documents;
 - ~Petitions if any?
 - ~Any and all material handed in after the meeting end.

The original is on file at the Montana Historical Society and may be viewed there.

Montana Historical Society Archives 225 N. Roberts Helena MT 59620-1201 2013 Legislative Scanner Susie Hamilton

BUSINESS REPORT

MONTANA HOUSE OF REPRESENTATIVES 63rd LEGISLATURE - REGULAR SESSION

HOUSE JOINT APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND HUMAN SERVICES

Date: Tuesday, February 5, 2013

Place: Capitol

Time: 8:00 AM

Room: 102

BILLS and RESOLUTIONS HEARD: None

EXECUTIVE ACTION TAKEN:

Contingency Language Request Decision Package 110

Comments:

REP. Ron Ehli, Chair

HOUSE OF REPRESENTATIVES Roll Call HEALTH AND HUMAN SERVICES JOINT SUBCOMMITTEE

DATE: 2/5/13

NAME	PRESENT	ABSENT/ EXCUSED
SEN. JASON PRIEST, VICE CHAIR		
SEN. MARY CAFERRO		
REP. DAVE HAGSTROM		
REP. PAT NOONAN	1//	
SEN. ROGER WEBB	1//	
REP. RON EHLI, CHAIR	V	

HOUSE OF REPRESENTATIVES Roll Call Vote HEALTH AND HUMAN SERVICES JOINT SUBCOMMITTEE

1 13.	13-20 language Action				
DATE <u>2/5/13</u> BILL NO	MOTION NO				
MOTION:					
		: '			
NAME	AYE	NO	If Proxy Vote, check here & include		
			signed Proxy Form with minutes		
SEN. JASON PRIEST, VICE					
CHAIR					
SEN. MARY CAFERRO					
REP. DAVE HAGSTROM					
REP. PAT NOONAN					
SEN. ROGER WEBB					
REP. RON EHLI, CHAIR		-			

HOUSE OF REPRESENTATIVES Roll Call Vote HEALTH AND HUMAN SERVICES JOINT SUBCOMMITTEE

DATE 2/5/3 BILL NO 1 10 MOTION NO. MOTION:

		<u> </u>	
NAME	AYE	NO	If Proxy Vote, check here & include signed Proxy Form with minutes
SEN. JASON PRIEST, VICE CHAIR			
SEN. MARY CAFERRO	/ /		
REP. DAVE HAGSTROM			/
REP. PAT NOONAN	/ /	-:	
SEN. ROGER WEBB			
REP. RON EHLI, CHAIR	$\sqrt{}$		

AUTHORIZED COMMITTEE PROXY

I request to be excused from the							
Committee because of other c	ommitn	nents. I	desire to leave my proxy vote with:				
may materia							
Indicate Bill number and your vote Aye or No. If there are amendments, list them by name and number under the bill and indicate a separate vote for each amendment.							
BILL/AMENDMENT	AYE	NO	BILL/AMENDMENT	AYE	NO		
MTAP LANGUAGE							
DP 110	V						
Rep. (Signat	ure)		Date 2/5	113			

MONTANA House of Representatives Visitors Register HOUSE JOINT APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND HUMAN SERVICES COMMITTEE

Tuesday, February 5, 2013

Sponsor: No Bills to be Heard

PLEASE PRINT

Name	Representing	Support	Oppose	Info
Res Gibbs	Extended Employment	V	Oppose	11110
Rith Schilling	Extended Full Symen			
Stevi Parce	Extended Employment	X		
Darriene LAmping	MTAP	X		
travis Hoffman	Independant Living	X		
Shyla Patera	WCILS	X		
1 (M Soon	NC1L5	X		
Greater Northcutt	Netls	X		
June Hermanson	NCT LS / 50/4	X		
MARCARET KEENER	NCIS	$\hat{\alpha}$		
Joel Peden	MTING LIVING Ctrs	λ		C
MILE Mayer	5 MMit ILL			
Mark Sanders	self	×		
Bot Maffit	Montana Irdepudar Ling Brija	et X		
Lloyd Sparks	MT independent living Project	X		
Janete Clark	Center for Manal HA	X		
Samenting Sones	C'4MH Supported Employment	*		
CREL OBEN	HELEN THORSTRIKE	X		
Beth Brennemon	Disability Rights W+	X		
	' / '			

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.